

SUPPLEMENTAL INFORMATION FOR  
CONCEALED HANDGUN APPLICATIONS

Name of Applicant: \_\_\_\_\_

Addresses (list all addresses you have lived at for the past 5 years)

Not Applicable \_\_\_\_\_

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Previous Names Used (include legal name changes, maiden name and change of name due to marriage)

Not Applicable \_\_\_\_\_

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Physical Features (Please write out, no abbreviations)

Height \_\_\_\_\_

Weight \_\_\_\_\_

Hair Color \_\_\_\_\_

Eye Color \_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant

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